**Invoice Address** Lancashire Teaching FT RXN Payables 7205 PO Box 312 Leeds **LS11 1HP** 

Supplier Viamed Ltd 15 Station Road Cross Hills Cross Hills
Keighley, West Yorkshire
BD20 7DT, United Kingdom
Tel: +44 (0) 1535 634542
Fax: +44 (0) 1535 635582
Email: info@viamed.co.uk
VAT Reg No: GB287389593
Company Reg No: 01291765
EORI No: GB287389593000

Contact Name Contact Tel Account **Customer Reference** Date

Trudy Reynolds 01772520697 00004260 226901485 11 Aug 2023

**UK Pounds** 

**Tracking Number** 

1Z9W96386842437300

Priced In

Delivery Address Royal Preston Hospital Stores Sharoe Green Lane North Fulwood Preston

PR29HT

## Invoice RVM145035-1

CIP Carriage and Insurance Paid To Royal Preston Hospital, UK \* Incoterms(r) 2020

## Delivery Reference DVM145035-1 Contact sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1114006 Tariff 9018199000 CoO U.S.A.	EyeMax 2 Neonatal Phototherapy Mask - Prem Ref. R300P02 Pack of 20	ie 1	55.30	11.06	66.36
PPUPS1	UPS Courier Delivery - Standard 1Z9W96386842437300		8.00	1.60	9.60

**Total Net:** 63.30 Total Vat: 12.66 Total: 75.96

Barclays Bank PLC Sort Code 20-78-42 00906662 Account Number

IBAN BIC BUKBGB22
Terms & conditions https://www.viamed.co.uk/terms

GB05BUKB20784200906662

Full invoice amount to be credited to our account net of all bank charges. Claims: Please claim non delivery within 7 days of invoice. Shortages or damage within 3 days of receipt. Claims after these times cannot be entertained. Title to goods does not pass until payment in full has been received.

Banking details Bank

Terms: Net 30 days from date of invoice.

Page 1